

BANKERS LIFE AND CASUALTY COMPANY - NAIC 61263

LTC Individual - Nursing Facility/Residential Care - Tax Qualified

POLICY FORM: GR-N340

1. Maximum Policy Benefit (MPB) = In year(s). Enter the number of days in Company Notes.

1Yr	2Yrs	3Yrs	4Yrs	5Yrs	6Yrs	7Yrs	Lifetime	Other
YES	YES	YES	YES	YES	YES	NO	NO	YES

MPB
Company Notes: We offer 365,500,730,1000,1095,1460,1500,1825,2000,2190,2500,2920 days. 2920 (Number of Days) times the Nursing Facility Daily Benefit = 8 Years. The maximum policy benefit for ages 80 - 84 is 730 days (2 years).

2. Nursing Home/Facility Daily Benefit Amounts (NHB) - There is a minimum and maximum amount offered in dollar increments.

Minimum	Maximum	Increment	Day	Week	Month	None	Other
\$40	\$300	\$10	YES	NO	NO	NO	NO

NHB
Company Notes: Enter Notes: None reported by the company.

3. Residential Care Facility Daily Benefit (RCFE) - Represents the RCFE percentage of the Nursing Facility Limit.

100%	90%	80%	75%	70%	Other
YES	NO	NO	NO	NO	NO

RCFE
Company Notes: Enter Notes: None reported by the company.

4. Home Care Benefit (HCB) - Represents the percentage of Home Care Benefit Amount for Comprehensive Policies.

100%	90%	80%	75%	70%	60%	50%	None	Other
NO	NO	NO	NO	NO	NO	NO	NO	NO

HCB
Company Notes: Enter Notes: This is a Facility Based Care Only Policy.

5. Home Care Only Benefit Amounts (HCBO) - There is a minimum and maximum amount offered in dollar increments.

Minimum	Maximum	Increment	Day	Week	Month	None	Other
						YES	

HCBO
Company Notes: Not Applicable: This LTC policy form is not a Home Care Only policy.

6. Qualification for Benefits (QB)

QB_2_OF_6	QB_2_OF_7	QB_OTH1	QB_MN	QB_CI	QB_90DR	QB_OTH2
YES	NO	NO	NO	YES	YES	NO

QB Company Notes: The need for human assistance or continual supervision to perform at least two of six Activities of Daily Living.

7. Elimination Period (EP) = In days Select all that applies.

0	20	30	60	90	100	CALENDAR	SERVICE	Other
YES	NO	YES	YES	YES	NO	NO	YES	YES

EP Company Notes: Enter Notes: 15 day and 180 day options are also available.

8. Inflation Protection (IP)

IP Methodology	5% Compound	5% Simple	Guaranteed Purchase Option	Other
Explain IP Methodology: Maximum Daily Benefit and the Maximum Benefit amount per claim episode are increased each policy anniversary by the selected inflation option without regard to claims paid. Premiums remain level.	YES	YES	NO	YES

IP Company Notes: Enter Notes: 3% and 4% compound inflation options are also available.

9. Waiver of Premium (WAVP)

Enter Notes: Premiums are waived after 90 days of receiving covered services. Regardless if the elimination period has been satisfied. Premium is waived for the entire policy, including any riders and spouses' premium if covered under the same policy.

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Long Term Care Insurance Rates

POLICY FORM: GR-N340

LTC Individual - Nursing Facility/Residential Care - Tax Qualified

	30 Day Elimination Period - Service				90 Day Elimination Period - Service			
ISSUE AGE	3 YEAR MAXIMUM POLICY BENEFIT - NO INFLATION PROTECTION	3 YEAR MAXIMUM POLICY BENEFIT - WITH INFLATION PROTECTION	LIFETIME BENEFIT - NO INFLATION PROTECTION	LIFETIME BENEFIT - WITH INFLATION PROTECTION	3 YEAR MAXIMUM POLICY BENEFIT - NO INFLATION PROTECTION	3 YEAR MAXIMUM POLICY BENEFIT - WITH INFLATION PROTECTION	LIFETIME BENEFIT - NO INFLATION PROTECTION	LIFETIME BENEFIT - WITH INFLATION PROTECTION
50	\$449	\$1,523			\$403	\$1,367		
55	\$581	\$1,789			\$521	\$1,606		
60	\$834	\$2,192			\$749	\$1,967		
65	\$1,246	\$2,855			\$1,119	\$2,563		
70	\$2,043	\$4,003			\$1,834	\$3,593		
75	\$3,395	\$5,906			\$3,048	\$5,302		
80								

Customer Service Telephone Number: (800) 231-9150